164 Rickets is unknown, and difficult labour among peasant women is rare, though puerperal fever is common. In some instances, if there is a midwife, she is shared by several [847] villages. A law has recently been passed forbidding attempts at abortion, but it is not strictly enforced. There are a good many infant deaths. Maternal morbidity is not high, in [142] spite of the prevalence of puerperal fever. The women as a whole are robust, of good physique and inured to hardship. [757] The French treatment of sepsis by induced (turpentine) abscess is common and is found to be very successful, the fever running its course in 7-8 days, with low mortality rate. [855] Children are breast-fed, feeding bottles being unknown. The feeding continues until the age of one year or longer. Infantile paralysis is unknown in this district, though it does occur in other parts of the country. Rheumatism and arthritis are common.

743 A SMALL operating theatre is attached to the hospital for 752 emergency cases like suppurating appendices and ruptured hernia, other cases being sent to the hospitals in larger towns. Small surgical operations are also performed. The table is convenient, in that it can tilt at any angle from head to foot, but it cannot be lowered or raised at will. The only light is a small electric globe high up in the ceiling, with no facilities for lowering. Operations are, however, mostly done in daylight. If necessary, lamps or even candles are requisitioned. A small room for sterilising purposes opens off the theatre.

743 THE PAVILION for infectious cases is situated about twenty 164 feet from the main building, in close proximity to the staff house and kitchen. Its beds were empty at the moment of inspection. Scarlet fever is the most common epidemic in this vicinity, and the beds were full one month ago. Epidemics of dysentery and typhoid also occur. Typhus is not known here, though frequent in Bessarabia. Diphtheria is fairly common.

759 THERE ARE a medical doctor and a surgeon in attendance, the latter being only part-time.

743 THE HOME for the incurables was next visited. It is a handsome villa, situated near the main street, but farther from the centre of the town. As before stated, it is a branch of the nerve clinic in Bucharest, and is under the supervision of

2 [illegible]

743 Prof. Dr. Cantacuzene, who visits it two or three times yearly. A doctor is in charge with a Sister of Mercy as nurse and two untrained local nurses, one for the men and one for the women. There are thirty male beds and twenty female [764] beds. The cases are mainly paralytic and epileptic, with a certain number of war invalids and diabetics. The beds were mostly empty when seen, as the cases are ambulant.

BATHROOM and lavatory accommodation in both hospitals is necessarily primitive.

● 759 744 THERE ARE three other doctors in the town—one for the military, another for the insurance societies, and a third for the direction of general sanitary work, corresponding to a British Medical Officer of Health. The headquarters of the last-named are at the Mayor's office. Medical inspection takes place once a month in the schools, each child being examined thoroughly each time. There are no dentists in the town, extraction of teeth, etc., being performed by the [751] local doctors. Vaccination is obligatory and is done when the child is one month old. At the age of seven, on entry into school, a second vaccination is required, and in the case of a boy, at the age of 18, when he begins his premilitary service.

758 AS REGARDS payment for medical treatment, poor people who cannot afford to pay are treated free, otherwise 10-20 lei is charged for a consultation and 20-30 lei per day in hospital. Most of the patients are insured against sickness by paying regular contributions under State guidance.

759 DOCTORS RECEIVE their training in one of the three centres, Cluj, Bucharest or Jassy. Cluj is considered the best equipped. So far there are no medical text-books in Roumanian. German text-books and German medical traditions are followed at Cluj, while French text-books and French traditions are in use at Bucharest and Jassy. One year is spent in preparation, Chemistry, Physics, etc., being studied. Five years of actual medical work, theoretical and practical, follow. For the past eight years a further course of two years in specialised work at a hospital has been insisted upon.

N. H. S.

[in Curtea De Arges -- Analyst]

463 438 industrial labour. One-third of all workers engaged in industry are independent artisans, on whom the community is dependent for its services, but who do not play any important part in war production. In certain of the larger armament works German controllers have effected a considerable degree of rationalisation.

3. Mining

316 727 There is a shortage of miners; Russian prisoners of war have been employed in mining during 1942. Many miners were reported to have been included in the territory transferred to Hungary.

4. Armament Works

719 464 There is a general shortage of labour in metal and engineering factories, particularly of skilled labour. A 12-hour day was legalised at the beginning of 1942, but it is doubtful if in fact a 12-hour day is ever worked.

5. Timber

313 464 There is a shortage of labour, both for lumbering and for timber manufacture.

6. Textiles and Clothing

464 288 294 The total number of workers in these industries has probably fallen considerably, due to reduction of available raw materials. The delivery of supplies to individual mills seems to be somewhat erratic, and there is evidence of considerable part-time work: for instance in a survey of some 43 factories in December, 1942, 11 were working full time, 21 on a reduced scale, and 11 at a very reduced scale.

7. Building

499 712 464 The extent of fortification building and general road and rail construction in Rumania is unknown, but in the second half of 1942 there was evidence of a scarcity of general labour for such projects, and of Russian prisoners of war working on rail construction.

438 464 [759] In the other branches of occupation, transport services, etc., there is no evidence of labour shortage, apart from doctors, many of whom have been mobilised for the army.

D. CONTROL OF LABOUR

1. The Youth Labour Service

466 883 A youth labour service founded on the German model was established in March 1941. The leaders were trained in Germany, but it was only in April 1942 that the labour camps began to function. Youths are called up in their 19th–20th year, and the period of service lasts 7 months.

(*See* Part II, Chapter V.B. for further details.)

2. Civil Mobilisation

466 A general civil mobilisation decree was passed in May 1941 by which (1) employment cards were introduced; (2) men and women aged 20-57 were liable to compulsory employment if not employed.

Two subsequent decrees were published in March and May 1943, one for the reorganisation of agriculture, forestry and fishing, and the second for the reorganisation of industry. Each of these decrees gave full powers to the appropriate authorities for the mobilisation and transfer of labour.

In addition to the general labour decrees which have so far had little influence on the labour situation, there have been regional decrees applying to individual localities, e.g. in Bessarabia, in February 1942, all the inhabitants aged 12-70 were called upon for compulsory agricultural labour unless already employed.